

TERMS OF REFERENCE FOR EXPERTS

Terms of reference for on-site activities and missions

Action code and partner country: SOCIEUX 2023-08 MONTENEGRO

Action title: Support to the Ministry of Health of Montenegro in creating a quality control system

Partner institution: Ministry of Health of Montenegro

Activity/ies number(s) and title(s):

Activity 3 – Tools to create a quality of care measurement framework, indicators and reporting on progress

Tentative dates of implementation and location:

Activity 3 - 30 October (on site 13-24 November) until 8 December 2023 (onsite: Podgorica)

Expert positions and responsibilities (by activity):

- Activity 3: Expert 1 (principal) Access to health, health policy, Governance, transparency & accountability P&S steering and implementation, Monitoring & Evaluation(M&E)
- Activity 3: Expert 2 Health policy, Governance, transparency & accountability P&S steering and implementation, Organ. structures, roles and arrangements

Workload:

Activity 3 - Expert 1: Total 17 days (7 days at distance; and 10 days onsite) Activity 3 - Expert 2: Total 16 days (6 days at distance; and 10 days onsite)

Call for experts' reference: 23-08/MNE/3

Version - #: □ Draft Date: 14 April 2023

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1 BACKGROUND INFORMATION

1.1 Country overview

Montenegro is a country located in South-Eastern Europe, the capital is Podgorica. Montenegro has a surface of 13 883 square meters and a population of approximately 613,100 inhabitants. Montenegrin is the official language of the country, other languages such as Bosnian, Croatian, Serbian and Albanian are also used officially. Montenegro is a parliamentary republic and gained its independence from Serbia in 2006. Presidential elections took place in April, electing Jakov Milatovic at the head of the country. Parliamentary elections will take place in June of 2023. Montenegro has a GDP of 5.9 billion USD. Inflation has been significant but its effect on the cost of living was limited. High public debt and a deteriorating global environment require the country to pursue fiscal consolidation and reforms.

Negotiation for the accession of Montenegro to the EU began in June 2012. To this date, 33 negotiating chapters are opened, of which three have been provisionally closed. Montenegro continued to implement the Stabilisation and Association Agreement (SAA). Concerning chapter 19, related to Social Policy and Employment; EU rules in the social field foresee minimum legal labour standards, equality, health and safety at work and non-discrimination and aim to promote social dialogue.

1.2 Sector situation

The health system of Montenegro is based on a social health insurance system, with more than 95% of the population being covered by social health insurance. The switch to a fully tax-funded health insurance system happened in 2022. Additional funds come from the state budget, as well as substantial out-of-pocket payments, with the latter amounting to 40% of current health expenditure in 2018. In 2017, almost 10% of all households experienced catastrophic health spending.

The Ministry of Health, the Health Insurance Fund and public and private health care institutions are responsible for health care service delivery. The Health Insurance Fund is responsible for the implementation of health policy related to health insurance. For the implementation of pharmaceutical policy, the state has set up the Agency for Medicines and Medical Devices (CALIMS).

Health care providers in the public sector include 18 health centres, seven general hospitals, three specialized hospitals, the Clinical Centre of Montenegro, the Institute for Public Health, the network of emergency services, the Blood Transfusion Institute, and the Pharmacies of Montenegro "Montefarm". Primary care is provided by the "chosen doctor" in the health centre. Secondary and tertiary health care is provided through specialized clinics and hospital wards. ¹

According to a study conducted by the European Observatory on Health Systems and Policies (WHO Europe)², Montenegro lacks an operational monitoring and evaluation system. Data collection is fragmented, statistics not always publicly available, thus data are not sufficiently used for decision-making purposes.

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¹ Montenegro health system information (who.int)

² <u>Health systems in action: Montenegro | European Observatory on Health Systems and Polices (who.int)</u>

1.3 Role of partner institution in the sector

The Ministry of Health³ has overall responsibility for ensuring that quality, appropriate, cost effective and timely health services are available for all citizens and visitors in Montenegro. Ministry of Health, as a creator of health policy and the creator of the environment for its implementation, pays great attention to the quality of health care in Montenegro. It serves the Government as an advisor on matters to do with health and disability, propose changes in regulations, makes sure that laws and regulations are followed, sets up and pays for support services and provides information to healthcare providers and the public.

One of the major aims is to improve public health and enhance the legal and regulatory framework for action in the health system. The goal is to provide a universal access to health care to all citizens by implementing a defined set of the standards which will significantly improve quality of the health service. Moreover, Ministry of Health works on improvement of infrastructure capacities, construction of new health facilities, the development of medical technologies, the acquisition of the most modern and sophisticated medical equipment and devices, professional training and education of doctors and other medical staff in order to provide more efficient and better quality of health care to citizens and create a better environment for the health workers.

2 ACTION DESCRIPTION

2.1 Overall objective

• Institutional capacities of employment, labour and social protection institutions are strengthened and reinforced.

2.2 Specific objective (s) (purpose)

To develop a quality control system in health

2.3 Expected results

- Shortcomings in the institutional and organizational requirements of quality control are identified
- MoH can spearhead the development of a quality-of-care measurement framework

2.4 Final deliverables

- A gaps and needs analysis including recommendations for improvement
- Guidelines for the MoH to create a QC system

3 METHODOLOGY

3.1 General methodology (of the action)

This action will provide the MoH with an overview of its current quality control (QC) capacities in governance and health information systems, and to offer a methodology to create a quality of care measurement framework, indicators and reporting on progress.

Governance and health information are two of the six core components of the WHO framework describing health systems (service delivery, health workforce, health information systems, access to essential medicines, financing, leadership/governance). They were chosen as focus for this action as they are cross-cutting components and provide the basis for the overall policy and regulation of other health system blocks.

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³ Health - Government of Montenegro (www.gov.me)

3.2 Planned activities (work plan of the action)

The following activities are currently planned for the action:

- Activity 1 Analysis of MoH's quality control capacity in governance
- Activity 2 Analysis of MoH quality control capacity in health information systems
- Activity 3 Tools to create a quality of care measurement framework, indicators and reporting on progress

The present terms of reference cover the services expected for activities of the above work plan:

Activity 3

3.3 Inclusion of cross-cutting issues

SOCIEUX+ recognises the importance to include cross-cutting issues in social protection, labour and employment policies and systems. The following cross-cutting issues are duly taken into account:

- Gender equality;
- Good governance;
- Human rights (including rights of children, people living with disabilities, vulnerable groups and minorities); and,
- Social and economic inclusion of vulnerable groups.

4 ACTIVITIES DESCRIPTION

4.1 Tasks

The principal expert will lead the on-site mission. He/she will be responsible for the delivery of all deliverables of the activity (see below Section **Erreur! Source du renvoi introuvable.**). He/she will be responsible for the preparation, coordination, implementation and reporting of the overall activity towards SOCIEUX+.

In activity 3, experts will provide the dedicated staff at MoH with tools to create a quality measurement framework, indicators and reporting process.

A sound monitoring strategy enables decision-makers to accurately track progress and performance, evaluate impact, and ensure accountability at country and global levels.

Tasks to be done by the partner institution

Preparation phase

- Make themselves available for pre mission briefings
- Make themselves available by email and provide all necessary documentation requested by experts to do their desk research
- To identify key staff within the Ministry who have technical skills to accompany experts during the mission

Tasks to be done by the experts

Preparation phase

- Ahead of the action to get substantial knowledge of the local context, particularly Montenegro's
 national policies and strategies aiming at improving quality of care (and in a broader sense the
 country's national health policy and planning);
- Preliminary contacts with the Partner in view of the preparation of the mission's methodology and agenda, to be transmitted ahead of the mission to the SOCIEUX+ team for approval;
- Taking part to the pre-mission briefing with SOCIEUX+ team (around 1 week before the start of the action);
- To make themselves available for a briefing meeting with the EU Delegation in Podgorica (SOCIEUX+ will introduce the experts to the focal point within the EU Delegation);

Implementation

- During the mission, to conduct consultations with the Partner's key staff. The partner institution shall facilitate and arrange the meetings in Podgorica;
- Experts will work alongside designated MoH staff on guidelines to create a quality control system that is pertinent to the national context, and is a continuity of elements emanating from the SWOT of activities 1 and 2;
- The WHO framework will remain the benchmark for creating the measurement strategies;
- To present the outcomes of the mission to the partner in order to discuss and take into account comments on the contents of the deliverables before their finalization;
- At the end of the mission, timely submission to SOCIEUX+ of the final deliverables (10 working days after the mission), and availability to go through an eventual round of comments and adjustments in interaction with SOCIEUX+ and the Partner:
- To channel to SOCIEUX+ Communication officer any material that can be useful to inform the public about the activity (pictures, interviews, brief notes or articles);
- To use the different templates and evaluation forms provided by the SOCIEUX+ team.

4.2 Deliverables

4.2.1 Pre-mission deliverables

- P1: A methodological note, detailing the working approach, tools and methods to employ, a risks analysis, etc. The Methodological Note shall not exceed 3 pages (excluding cover page and annexes).
- P2: A activity/mission agenda, detailing the meetings and working sessions to be held, persons to meet, etc. The Activity/mission Agenda shall not exceed 2 pages.

4.2.2 Final deliverables

- D1: An individual Expert Mission Report (ExMR) in SOCIEUX+ format (template provided). This report is a confidential product intended solely for and use by SOCIEUX+. The expert team may also submit a single-joint ExMR report if they prefer to do so (see instructions on the template).
- D2: An individual completed Expert Feedback Form (ExF) completed online (see instructions and link on the ExMR template).
- D3: A collective Activity Report (AcR) in SOCIEUX+ format (template provided). This AcR is to be produced jointly by the mission team. It is intended for the Partner Institution, and will be shared, most probably, with key stakeholders of the action. The report will reflect the tasks conducted in during the activity. It shall provide a meaningful contribution towards the final deliverables of the action.
- **Technical deliverable**: A report containing the strategy to create the QoC measurement framework, indicators and reporting on progress. This report will not be a fully-fledged KPI and M&E for the MoH, but rather the methodology to attain this.

5 REPORTING AND SUBMISSION OF DELIVERABLES

5.1 Formats

<u>All deliverables and products of the activity</u> (notes, reports, presentations, etc) shall comply with the formats and templates provided by the SOCIEUX+ Team.

All deliverables are to be submitted in electronic in <u>electronic editable versions</u> [Microsoft Word 97-2003 [doc], PowerPoint 97-2003 [ppt] and Excel 97-2003 [xls]; or in equivalent OpenDocument format). Non-editable electronic document such as in Portable Document Format (PDF) shall not be accepted.

<u>Templates for electronic presentations</u> during the activity/mission are provided by the SOCIEUX+ Team. These templates are in Microsoft PowerPoint format and comply with the SOCIEUX+

Corporate Image standards. These templates are to be used as a sole format by all members of the expert mission team. They are to be used <u>for all presentations by the experts</u> during and for the activity/mission. The use by the experts of their own, or their organisation(s), templates or formats are not allowed unless otherwise instructed in written [by email] to the experts by the SOCIEUX+ Team.

All versions of deliverables or other products used or produced during activity/mission by the experts shall include the following disclaimer:

"Disclaimer:

The responsibility of this publication sole lies with its authors. The European Union, the European Commission, the implementation partners of SOCIEUX+ and the SOCIEUX+ Staff are not responsible for any use that may be made of the information contained therein."

<u>Please refer to the expert information package for further guidance on communication and templates.</u>

All deliverables are to be provided in English.

5.2 Submission and approval

All deliverables versions (drafts, final or other) shall be submitted directly and only to SOCIEUX+ Team, unless otherwise instructed in writing [by email] to the experts by the SOCIEUX+ Team.

5.2.1 Pre-mission deliverables

- Pre-mission deliverables shall be submitted <u>no later than 5 working days before the start</u> of activity or departure of the mission of the experts, whichever is the earliest.
- Pre-mission deliverables will be shared and reviewed by the SOCIEUX+ and the Partner Institution. Feedback on the deliverables should be provided to the Principal Expert at latest 2 days before the start of activity or departure of the mission of the experts, whichever is the earliest. Comments and recommendation of this feedback shall be taken into account for the implementation of the activity/mission by the experts. Only the mission agenda shall be resubmitted with revision if requested by the SOCIEUX+ Team.

5.2.2 Final deliverables

- The first draft versions of the final deliverables are to be submitted <u>no later than 10 working days upon completion</u> of the activity or return of the experts.
- Feedback to the first draft version of the report should be provided 10 working days after its submission.
- Inclusion of the feedback on drafts versions is expected 5 working days upon reception of the comments by the principal expert. (In general, no more than one round of feedback and revision is required, unless the quality of the deliverables is considered unsatisfactory by the SOCIEUX+ Team or/and the Partner Institution.)
- Final versions of the deliverables should be approved or rejected no later than 10 working days upon their submission to the SOCIEUX+ Team.
- Final payments and reimbursement of travel costs to experts can only be authorised upon approval of the final version of the deliverables by SOCIEUX+.

6 REQUIRED EXPERTISE

6.1 Expertise profile

Principal expert (Expert #1):

Area(s) of expertise:

Access to health, health policy

Specific skill(s) & competency(ies):

 Governance, transparency & accountability P&S steering and implementation, Monitoring & Evaluation(M&E)

Requirements (essential/required):

a) The education type and level required:

"Master's" degree (or equivalent advanced academic degree or diploma requiring 4 years of formal education) in the areas of expertise (see above), or another directly related discipline. In its absence, the master's degree can be replaced by a combination of academic degree(s) with relevant years of work/professional experience combining the area of expertise and specific skills requested:

- An intermediate academic degree ("Bachelor", equivalent degree or diploma requiring three (3) years of formal education) with an additional three (3) years of working/professional experience; or,
- A first-level academic degree ("License", equivalent degree or diploma requiring two (2) years of formal education) with an additional five (5) years of working/professional experience.

The additional work experience used in calculating academic equivalence <u>shall not count</u> towards the <u>minimum general professional experience</u>.

b) The number of years of relevant work/professional experience combining the area(s) of expertise and demonstrated specific skill(s) & competence(s):

Seven (7) years.

- c) Required language knowledge: English
- d) Demonstrated knowledge of functioning of health systems

N.B.: Translation and interpretation services may be commissioned by SOCIEUX+.

Additional assets (advantageous in selection):

e) Language(s): Montenegrin, or Serbian, Albanian, Bosnian, Croatian

Expert 2

Area(s) of expertise: Health policy

Specific skill(s) & competence(s):

 Governance, transparency & accountability P&S steering and implementation, Monitoring & Evaluation(M&E)

Requirements (essential/required):

a) The education type and level required:

"Bachelor's" degree (or equivalent academic degree or diploma requiring three (3) years of formal education) in the areas of expertise (see above), or another directly related discipline. In its absence, the bachelor's degree can be replaced by a combination of:

 A first-level academic degree ("License" or equivalent) with an additional two (2) years of professional experience in one or more relevant fields.

The additional work experience used in calculating academic equivalence <u>shall not count towards the minimum general professional experience.</u>

- b) The number of years of relevant work/professional experience combining the area(s) of expertise and demonstrated specific skill(s) & competence(s):
 - Five (5) years.
- c) Required language knowledge: English
- d) Demonstrated knowledge of health systems
 - N.B.: Translation and interpretation services may be commissioned by SOCIEUX+.
- e) Other essential qualification(s):
- f) Language(s): Montenegrin, or Serbian, Albanian, Bosnian, Croatian

6.2 Estimated workload

	Preparation	Onsite work	Reporting & deliverables	Total
Principal expert (#1)	4	10	3	17
Expert (#2)	3	10	3	16
Total experts	7	20	6	37

7 APPLICATIONS

7.1 Call for experts

All calls for experts for SOCIEUX+ activities are published online on the SOCIEUX+ website. Interested experts should submit their application on the SOCIEUX+ online expert database: https://pmt.socieux.eu (currently only available in English). The application process is:

- 1. If they have not already, experts create their SOCIEUX+ account by clicking on "Create an account" using an email address.
- 2. Login details for their account will be sent to experts by email, experts should create and submit their profile for review by⁴:
 - a. Providing contact details
 - b. Providing information on the competencies, skills and working history of the expert. Experts are required to provide only limited information through fields marked with an asterisk. However, experts are encouraged to complete in most detail de sections on skills and competencies as the SOCIEUX+ Team also regularly reviews profiles in the roster to identify and contact potential experts for future missions.
 - c. Uploading of a curriculum vitae, preferably in Europass format⁵.
- 3. Once their profile is approved by the SOCIEUX+ Team, they can apply to any available calls for experts accessible under the tab "Call for experts" and click on "Apply."

If more information is needed, please contact SOCIEUX+ by email at experts@socieux.eu with the reference number of the application.

Collaborative or interested institutions wishing to make expertise available for a specific call for application may directly contact the team of SOCIEUX+ at experts@socieux.eu.

7.2 Selection of experts

In principle, SOCIEUX+ mobilises experts from the public administrations and mandated bodies of EU member states, and practitioners working for social partners, including:

- Practitioners, civil servants and employees from publicly mandated bodies;
- Collaborators and employees of social partner institutions, such as trade unions and employer associations; and,
- Academic and research institutions.

Active public experts from collaborative institutions are given priority in the selection. Private consultants may also apply. Their application will be considered if an appropriate public expert cannot be identified.

Only short-listed applicants may be contacted. The selection process may include interviews by phone or other communication means.

Interested candidates may download the **Guide for Experts and Collaborative Institutions** with detailed information on contracting with SOCIEUX+ at www.socieux.eu

7.3 Contracting of public experts

Public experts can be on active duty or retired. Retired employees from international specialised agencies or cooperation agencies can also be mobilised, without regard to their former employer's collaborating with SOCIEUX+ on a specific action. Retired experts are considered as public experts for all purposes, benefits, and financial compensation provided by SOCIEUX+.

 $^{^4}$ SOCIEUX+ expert database and other management tools comply with the General Data Protection Regulation (GDPR) -Regulation (EU) 2016/679.

⁵ Europass templates for CVs are available here: http://europass.cedefop.europa.eu/en/documents/curriculum-vitae/templates-instructions

Short-listed candidates may be required to provide the contact of the employer or proof of their ability to be directly contracted under their status as a civil servant or public employee.

7.4 Financial compensations

Contract officials or active-duty or retired employees are entitled to standard fixed allowances of 350 euros per working day worked. The fees of private consultants are negotiated according to their number of years of relevant expertise and the standard scale of SOCIEUX+.

Retired experts are assimilated into public employees for all intents and purposes, benefits and financial compensation are provided by SOCIEUX+.

National regulations on remuneration and compensation of public employees and civil servants apply and may limit the payment of allowances by SOCIEUX+. The responsibility for compliance and verification lies with individual experts and their institutions of origin. The payment of income or other taxes is the sole responsibility of the mobilised experts and/or their organisations.

7.5 Travel costs

All travel expenses for the mobilised experts (public, private or international institutions) are covered by SOCIEUX following the **Guide for Experts and Collaborative institutions** with detailed information on contracting with SOCIEUX+ (version as of the date of signature of the contract).

8 COMMUNICATION & VISIBILITY

SOCIEUX + can use its communication channels, such as the web, newsletter and other media, to share information about the implementation and results of the activities. For this, contributions of the experts mobilised are expected. The experts may be requested to provide such contributions in the field of communication as photographs, provide short texts, and interviews.

Short briefings, before and after the mission, with the Communication Officer of SOCIEUX+. These briefings will provide the opportunity to identify communication opportunities and strategies.

For specific activities, visibility products, such as brochures, USB sticks, notebooks and pens, can be made available to experts for on-site distribution.

9 CODE OF CONDUCT

The experts mobilised by SOCIEUX+ will provide technical assistance from the preparatory stages of each activity to the delivery of products. The SOCIEUX+ Team will assist experts to fulfil their assignments by supporting and advising on preparing background materials before meetings. The SOCIEUX+ team will collect feedback from partner institutions and relevant stakeholders to ensure that mission reports and recommendations are delivered to national authorities, the EU Delegations in the partner countries and the European Commission.

The experts mobilised are not representing SOCIEUX+ or the EU. Technical opinions and recommendations expressed are their own. They shall not express negative opinions on the implementation of actions supported by SOCIEUX+ to third parties. Nevertheless, they shall be aware of SOCIEUX+'s objectives and functioning, and promote its services to the best of their knowledge, whenever possible and feasible.

The experts shall perform their duties in the Partner Country in a way that is fully compliant with and respectful of the local institutions, policies and cultural behaviours. They shall particularly adopt culturally-sensitive behaviour when dealing with their local counterparts.

10 OTHER CONSIDERATIONS

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11 ANNEXES

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ABOUT SOCIEUX+

The SOCIEUX+ Facility was established and funded by the EU through the European Commission's Directorate-General for International Partnerships (DG INTPA) and Directorate-General for Neighbourhood and Enlargement Negotiations (DG NEAR). The Facility is co-funded by France, Spain, and Belgium. It is implemented by a partnership composed of Expertise France (the partnership lead), Fundación Internacional y para Iberoamérica de Administración y Políticas Públicas (FIIAPP) from Spain, Belgian International Cooperation on Social Protection (BELINCOSOC), and the Belgian Development Agency (Enabel).

The Facility's general objective is to expand and improve access to better employment opportunities and inclusive Social Protection systems in Partner Countries. Its specific objective is to enhance Partner Countries' capacity to design, manage, and monitor inclusive, effective, and sustainable employment strategies and Social Protection systems through short-term, peer-to-peer technical assistance and knowledge development.

SOCIEUX+ recognises the impact of Social Protection and employment in reducing poverty and vulnerability. It supports the efforts of partner governments in promoting inclusive and sustainable Social Protection and employment systems. SOCIEUX+ also complements the efforts made through other EU initiatives.

The Facility is an expansion of SOCIEUX Social Protection EU Expertise in Development Cooperation, established in 2013.

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